

09-19-01

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PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0651-0022

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages 45]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets 8]
5. Oath or Declaration [Total Pages]
- a. Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 17 completed)
- b. i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No. 09 823,196

Prior application information:

Examiner TBA

Group / Art Unit. 2811

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label		25559 (Insert Customer No. or Attach bar code label here)		<input type="checkbox"/> or	<input type="checkbox"/> Correspondence address below
Name	Margaret Chappuis				
Address	Advanced Technology Materials, Inc.				
	7 Commerce Drive				
City	Danbury	State	CT	Zip Code	06810
Country	USA	Telephone	203-794-1100		Fax 203-797-2544
Name (Print/Type)	Margaret Chappuis		Registration No. (Attorney/Agent)	45,735	
Signature	<i>Margaret Chappuis</i>		Date	9/18/2001	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

10/9/95 4831
10/9/18/01

APPENDIX A

Applicants: Thomas H. Baum, et al. Filing Date: Herewith

Application entitled: SOURCE REAGENT COMPOSITIONS FOR CVD
FORMATION OF GATE DIELECTRIC THIN FILMS USING
AMIDE PRECURSORS AND METHOD OF USING SAME

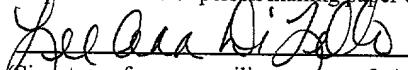
Express Mail Certificate

Date of Deposit: September 18, 2001

I hereby certify that this document is being deposited with the United States Postal Service, as Express Mail to "Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Box New Application, Assistant Commissioner for Patents, Washington, DC 20231.

Lee Ann DiLello

(Typed or printed name of person mailing paper or fee)



(Signature of person mailing paper or fee)

FEE TRANSMITTAL

for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT **\$1,778.00**

Complete if Known	
Application Number	TBA
Filing Date	HEREWITH
First Named Inventor	Thomas H. Baum
Examiner Name	TBA
Group / Art Unit	TBA
Attorney Docket No.	510-CIP

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge any underpayment of fees and credit any over payments to:
 Deposit Account Number **50-0860**
 Deposit Account Name **Advanced Technology Materials, Inc.**
 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
 Applicant claims small entity status.
 See 37 CFR 1.27

2. Payment Enclosed: Charge above deposit account
 Check Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Code	\$	Code	\$		
101	710	201	355	Utility Filing Fee	710
106	320	206	160	Design Filing Fee	<input type="checkbox"/>
107	490	207	245	Plant Filing Fee	<input type="checkbox"/>
108	710	208	355	Reissue Filing Fee	<input type="checkbox"/>
114	150	214	75	Provisional Filing Fee	<input type="checkbox"/>
SUBTOTAL (1)		(\$ 710.00)			

2. EXTRA CLAIM FEES

Claims	-20**	Extra Claims	Fee	from	Fee Paid
		X	below =		
Ind. Clms	66	46	18	828.00	<input type="checkbox"/>
Multiple Dependent Claims	6	3	80.00	240.00	<input type="checkbox"/>

Large Entity		Small Entity		Fee Description	Fee Paid
Code	\$	Code	\$		
103	18	203	9	Claims in excess of 20	<input type="checkbox"/>
102	80	202	40	Indep. claims in excess of 3	<input type="checkbox"/>
104	270	204	135	Multiple dependent claim, if not paid	<input type="checkbox"/>
109	80	209	40	Reissue indep. claims over original patent	<input type="checkbox"/>
110	18	210	9	Reissue claims in excess of 20 and over original patent	<input type="checkbox"/>
SUBTOTAL (2)		(\$ 1,778.00)			

**or number previously paid, if greater. For Reissues, see above

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)

SUBMITTED BY:

Complete (if applicable)

Name (Print/Type)	Margaret Chappuis	Registration No. (Attorney/Agent)	45,735	Telephone	203-794-1100
Signature	<i>Margaret Chappuis</i>			Date	9/18/2001